

SECTION I

▲ Investigator's Assurance ▲

Principal Investigator _____	E-Mail _____
Co-Principal Investigator _____	E-Mail _____
Other Personnel (GA, Project Mgr., etc.) _____	E-Mail _____
Dept. _____ Student ID # _____	Preferred Phone # _____
Mailing Address _____	Alternate Phone # _____
_____	Campus Mail Code _____
Title of Proposal _____	
Proposed Duration of Project (months/years) _____	Anticipated Start Date _____
Type of Funding (Federal/Federal pass-through/State/Foundation/Other/None) _____	
Funding Agency _____	PIAF # _____

☐ Please note that data collection cannot begin until approval is granted by the HSRRC

INVESTIGATOR'S ASSURANCE

- A. I will promptly report changes in the proposed study and any unanticipated problems involving risk to subjects, including adverse reactions, to the Human Subjects Review Committee. In case of DHHS supported activities, I will also report these problems to the Department of Health and Human Services (through the respective granting office).
- B. I assure that documentary evidence of informed consent will be retained for at least three years after the proposed study has been completed or discontinued.
- C. Since the Committee is obligated to review this activity at least on an annual basis, I will furnish it with a progress report no later than six weeks prior to the expiration of my project's approval.
- D. I, the undersigned, will be responsible for the ethical standards of this project, and for protecting the rights and welfare of the subjects.

Signature of Principal Investigator _____	Date _____
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I have read and approved this proposal:

Department Head (PRINT) _____	Signature _____	Date _____
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_____ Masters Thesis	_____ Masters Project	_____ Doctoral Dissertation	_____ Special Project
approval date: _____			

Dissertation/Thesis/Project Advisor (PRINT) _____	Signature _____	Date _____
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Advisor's Campus Mail Code _____	Advisor's E-mail Address _____
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☒ Please complete and return this form, along with your HSRRC application, and copies to the HSRRC, Office of Research & Strategic Partnerships (RSP), Market Center Building, 6th floor, Portland State University, Phone: (503) 725-4288